LEGISLATIVE RESOURCE CENTER

18 MAY 18 AM 10: 17

U.S. HOUSE OF REPRESENTATIVES

	STATES HOUSE OF REPRESENTATIVES . DISCLOSURE STATEMENT		FORM B Candidates, and New Employees	Page 1 of <u>(2</u>
Name: <u>V</u>	Villiam Cunningham	Daytime Telepho	one:	11
FILER	New Member of or Candidate for State: U.S. House of Representatives Candidates - Date of Election: Candidates - Date of Election:	8	Check if Amendment	(Office Use Only)
STATUS		Tiler Type (if Applicable): d Principal Assistant	Period Covered: January 1,	A \$200 penelty shall be assessed against any individual who files more than 30 days late.
2. Did you or	ring the reporting period? your spouse have "earned" income (e.g., salaries, pension/IRA distributions) of \$200 or more during the Yes od?	No V o	Did you have any reportable agreement of utside entity during the reporting period or ear up through the date of filing?	
	our spouse, or your dependent child have any reportable		ear up through the date of filing? Did you receive compensation of more th	an \$5,000 from a yes No
liability (more	than \$10,000) at any point during the reporting period? ATTACH THE CORF		ingle source in the current year and two pri	
	THIS FORM INCLUDES ONLY			
XCLUSIC	ON OF SPOUSE, DEPENDENT, OR TRUS	T INFORMATION	- ANSWER <u>BOTH</u> OF THES	E QUESTIONS
	stalls regarding "Qualified Blind Trusts" approved by the Committe rt details of such a trust that benefits you, your spouse, or depend		er "excepted trusts" need not be disclosed.	Have you excluded Yes No V
	- Have you excluded from this report any other assets, "unearner to not answer "ves" unless you have first consulted with the Comm		pouse or dependent child because they m	eet all three tests for

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: William Cunningham Page 2 or Ce

Assets and/or income Sources Value of Asset Type of income Amount of income Amount of income Amount of income Amount of income For sease the first investment or an incident value of sees at close of the reporting period. By an incident or income the first value of sees at close of the reporting period, and an incident or										•	K O	C	BLC														ı			3	CK C						1							8		HO.	В							1	1	1	1	1	1	1	1																				1	1	1	1																																											
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Use additional sheets if more space is required.

SCHEDULE C ~ EARNED INCOME

Name: William	Cunningham	Page_3_ of(

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse damed mount of source and amount of any honoraria.

EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

INCOME LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2016 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,495. The 2017 limit is \$27,765. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

Pourse (include data of require for how applie)	-	Ar	nount
Source (include date of receipt for honoraria)	Туре	Current Year to Filing	Preceding Year
ABC Trade Association, Ballmore, MD (July 15) State of Maryland Cost Maryland Cost Maryland Cost Maryland	Honoratum Selary	\$0 \$20,000	\$600 \$76,000
Ontario County Board of Education	Spouge Speech Spouge Salary	\$0 N/A	000,12 AwA
Une other than House staffer salary (month of January)	Salary	\$2,676	\$70000
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Name: William Canningham Page 4 or 6

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. New Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and isbilities owed to you by a spouse or the child, perent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. "Column K is for liabilities held solely by your spouse or dependent child.

							A	moun	t of LL	ability				
SP, OC, JT	Creditor	Date Liability Incurred MO/YR	Type of Liability	\$16,001- \$16,000	\$15,001- \$50,000	\$50,001- \$100,000	\$100,001- \$250,000	\$250,001- \$500,000	\$600,001- \$1,000,000	81,000,001- 88,000,000	\$5,000,001- \$25,000,000	\$26,000,001- \$50,000,000	Over \$50,000,000	Over \$1,000,000° ~ (Spoure/DC Liability)
	Exemple First Bank of Wilmington, DE	5/98	Mortgage on Rental Property, Dover, DE		in iii	**	X	W.W.	ñ in		22	44	°	O.S.
	Great Lakes Higher Ed Com	3/14	Student loans				X							
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SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year. Pirst-year candidates and new employees report positions held in the current calendar year and two previous years.

Position	Name of Organization
Member (Ambassator)	KIPP DC Ambassador Board (unpaid)

Use additional shouts if more space is required.

SCHEDULE F - AGREEMENTS

Name: William Cunnin cham Page 5	or <u>(0</u>
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Date	Parties to Agreement	Terms of Agreement
2019	Muself + U.S. Hause	Furlough
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SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule C.

	Source (Name and City/State)	Brief Description of Duties
Example:	Doe Jones & Smith, Hometown, Homestate	Accounting Services
	None	

Use additional sheets if more space is required.

FILER NO	res
(Optional)	

Name: William Cunnington	Page O of Le
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